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ROYSTON
(YORKS.)
URBAN DISTRICT COUNCIL

**ANNUAL
REPORT**

of the
Medical Officer of Health
and the Sanitary Inspector
for the
Year ended 31st December, 1955

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URBAN DISTRICT COUNCIL

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ROYSTON (YORKS) URBAN DISTRICT COUNCIL

HEALTH COMMITTEE 1955

Chairman of the Council:

Councillor G. SHONE, J.P.

Chairman

Councillor H. Griffiths

Vice Chairman

Councillor Mrs. J. A. Westwood

Committee

Councillor G. H. Cooke

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Councillor L. W. Jackson

Councillor T. Paling

Councillor J. B. Hudson

Councillor H. Pearson

Councillor G. Shone, J.P.

Staff of the Public Health Department:

Medical Officer of Health:

R. S. HYND, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health:

R. BARNES, B.A., M.R.C.S., L.R.C.P., D.P.H.

Sanitary Inspector and Cleansing Superintendent:

G. E. MILLAR, M.R.S.H., M.S.I.A., G.S.I.B., M.Inst.M.
(Certificated Inspector of Meat and Other Foods)

ROYSTON URBAN DISTRICT COUNCIL

Divisional Health Office,

6 Victoria Road,

BARNSELEY.

September, 1956

ANNUAL REPORT

for the Year ended 31st December, 1955

To the Chairman and Members of the Royston Urban District Council—

Mr. Chairman, Madam and Gentlemen,

I have the honour to present to you my Annual Report on the health and social conditions of your Urban District for the year ended 31st December, 1955. The report has the same general outline as those for the previous years and includes a survey of the health services for which the County Council is the administrative authority. A brief statement of and comment upon the hospital arrangements have also been included.

The vital statistics were most encouraging and compared favourably, not only with the statistics for the previous year, but with those for England and Wales. The birth rate was slightly higher than for last year, the death rate was low and the infant mortality rate was the lowest ever recorded in the district. Your attention has been drawn in the report to the continued high stillbirth rate and the necessity for considering stillbirths and neo-natal deaths as a single entity.

The infectious diseases were considerably increased with major epidemics of Measles and Polio, the latter as part of the epidemic which affected Barnsley and the surrounding districts during the summer months, and a minor epidemic of Whooping Cough.

I would like to take the opportunity to thank the Chairman and Members of the Health Committee for their support, my divisional health staff for their willing assistance and your Sanitary Inspector, Mr. G. E. Millar, for the loyal co-operation he has always afforded me.

I am,

Your obedient servant,

R. S. HYND,

Medical Officer of Health.

URBAN DISTRICT OF ROYSTON

Statistics and Social Conditions

Area	1,452 acres
Registrar General's estimate of population mid 1955	8,110
No. of inhabited houses according to the rate book, 31st December, 1955	2,594
Rateable Value 31st December, 1955	£31,895
Nett product of a Penny Rate (1955/56)	£122/13/11

The district is predominantly a coal-mining area with the majority of the population earning their living directly or indirectly from the industry. No major difficulty was experienced last year in finding suitable work for children leaving school and in this the two small factories in the district were of material help.

VITAL STATISTICS

Live Births

	Males	Females	Total
Legitimate	55	64	119
Illegitimate	1	7	8
	<hr/> 56	<hr/> 71	<hr/> 127

The number of live births registered was 127, 4 more than in the previous year. 63% of the mothers were delivered in hospitals or maternity homes as compared with 51% in 1954. The Registrar General supplied a comparability factor which relates the proportion of women in the district of child-bearing age with the proportion in a standard population. The crude birth rate multiplied by the comparability factor gives an adjusted birth rate which is comparable with similarly adjusted rates in other districts and with the birth rate for the country as a whole. The adjusted birth rate for your district last year was 15.2 per 1,000 estimated population as compared with 14.7 per 1,000 estimated population in 1954 and with 15.0 per 1,000 estimated population for England and Wales. The excess of births over deaths, or the natural increase of population, was 56 as compared with 50 for the previous year.

Premature Births

8 babies were born prematurely, 5 of whom were born at home and 3 in hospital. One baby died within a few hours of birth but the remainder survived and prospered.

Stillbirths

7 stillbirths were notified last year as compared with 6 in 1954. The stillbirth rate was 52.2 per 1,000 total births as compared with 46.5 per 1,000 total births in 1954 and with 23.1 per 1,000 total births for England and Wales.

Deaths

The adjusted death rate, which is the crude death rate multiplied by the comparability factor, was 10.9 per 1,000 estimated population as compared with 11.3 per 1,000 estimated population in 1954 and with 11.7 per 1,000 estimated population for England and Wales. There were 71 deaths among the inhabitants of your district, a decrease of 2 from the previous year, and the principal causes of death in order of numerical importance were: heart and circulatory diseases, respiratory diseases, cancer. Statistics relating to death rates and causes and ages at death are given in tabular form at the end of the section on vital statistics.

Infant Mortality

There was only one infant death last year. The baby was born prematurely and survived for only 24 hours. The infant mortality rate, which was the lowest ever recorded in the district, was 7.9 per 1,000 live births as compared with 40.7 per 1,000 live births in 1954 and with 24.9 per 1,000 live births for England and Wales.

It is very pleasant indeed to report such a low infant mortality rate, but, at the same time, I must draw your attention to the high stillbirth rate last year. In my annual report for 1954 I expressed the view that stillbirths and the early neo-natal deaths should be considered together for, fundamentally, the causes of death were the same. The combined neo-natal deaths and stillbirths were 8 last year as against a total of 10 peri-natal deaths in 1954. The satisfaction we must feel in the commendably low infant mortality rate is perhaps a little blunted by the continued high stillbirth rate.

There is an unfortunate tendency for lay persons to regard stillbirths as an unpleasant but natural hazard of pregnancy for which nothing can be done. The view is

quite erroneous for the death of an infant is important whether or not the infant was born alive. The stage has largely been reached when infant deaths which could have been prevented by better mothercraft and teaching have, in fact, been prevented and while our infant welfare efforts cannot be relaxed our worries on this score are, at least, diminishing. There remains, however, the problem of still-births and neo-natal deaths from causes clearly related to the ante-natal period, and progress in the prevention of these deaths has been much slower than the progress made in the prevention of deaths from post-natal causes. Further research is required and more attention must be given to ante-natal care. It cannot be expected that all babies will be born alive and survive, but we must always strive for this ideal state, be clear in our ideas and strong in our purpose.

Maternal Mortality

I regret to report that there was one death due to maternal causes last year.

DEATHS IN AGE GROUPS

	Males	Females	TOTAL
Under 1 year	1	—	1
1— 5 years	—	—	—
5—10 years	—	—	—
10—15 years	—	—	—
15—20 years	1	—	1
20—25 years	—	—	—
25—35 years	—	—	—
35—45 years	3	1	4
45—55 years	3	3	6
55—65 years	8	6	14
65—70 years	4	8	12
70—75 years	7	5	12
75—80 years	9	4	13
80—85 years	2	3	5
85—90 years	3	—	3
90 years and over	—	—	—
ALL CAUSES	41	30	71

CAUSES OF DEATH IN 1955

Causes of Death	Males	Females	TOTAL
1. Tuberculosis, respiratory	1	—	1
2. Tuberculosis, other	—	—	—
3. Syphilitic Disease	—	—	—
4. Diphtheria	—	—	—
5. Whooping Cough	—	—	—
6. Meningococcal Infections	—	—	—
7. Acute Poliomyelitis	—	—	—
8. Measles	—	—	—
9. Other infective and parasitic diseases	—	—	—
10. Malignant neoplasm, stomach	4	1	5
11. Malignant neoplasm, lung, bronchus	—	—	—
12. Malignant neoplasm, breast	—	—	—
13. Malignant neoplasm, uterus	—	—	—
14. Other malignant & lymphatic neoplasms	—	4	4
15. Leukaemia, aleukaemia	—	—	—
16. Diabetes	—	—	—
17. Vascular lesions of nervous system	2	5	7
18. Coronary disease, angina	4	4	8
19. Hypertension with heart disease	1	1	2
20. Other heart disease	11	5	16
21. Other circulatory disease	1	1	2
22. Influenza	1	—	1
23. Pneumonia	1	1	2
24. Bronchitis	4	2	6
25. Other diseases of respiratory system	1	—	1
26. Ulcer of stomach and duodenum	—	—	—
27. Gastritis, enteritis and diarrhoea	—	—	—
28. Nephritis and nephrosis	1	—	1
29. Hyperplasia of prostate	1	—	1
30. Pregnancy, childbirth, abortion	—	1	1
31. Congenital malformations	—	—	—
32. Other defined and ill-defined diseases	4	4	8
33. Motor vehicle accidents	1	—	1
34. All other accidents	2	—	2
35. Suicide	1	1	2
36. Homicide and operations of war	—	—	—
All causes	41	30	71

PRINCIPAL VITAL STATISTICS FOR THE YEAR 1955

Based on the Registrar General's figures

	Royston Urban District	Aggregate West Riding Urban Districts	West Riding Admins. County	England and Wales (Prov. Figures)
Birth Rate per 1,000				
estimated population:				
Crude	15.7	14.8	15.3	15
Adjusted	15.2	14.9	15.4	15
Death rate per 1,000				
estimated population:				
Crude	8.8	12.5	11.7	11.7
Adjusted	10.9	12.7	12.3	11.7
Infective and parasitic diseases excluding Tuberculosis but in- cluding Venereal Diseases	—	0.06	0.07	Not available
Tuberculosis:				
Respiratory	0.12	0.11	0.11	0.13
Other	—	0.02	0.01	0.02
All forms	0.12	0.13	0.12	0.15
Cancer	1.11	2.03	1.90	2.06
Vascular lesions of the nervous system	0.86	2.09	1.90	Not available
Heart and circulatory diseases	3.45	4.71	4.39	„
Respiratory diseases	1.23	1.28	1.21	„
Maternal Mortality	7.46	0.45	0.67	0.64
Infant Mortality	7.9	25.2	26.2	24.9
Stillbirths	52.2	26.4	26.4	23.1

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

The provision of residential accommodation for the aged and infirm and for those in need of care and attention is the responsibility of the County Council. Accommodation for those applicants to whom a flight of stairs presented no real difficulty was always readily available but once again ground floor accommodation was limited, and at certain times of the year was insufficient to meet all demands. The lack of accommodation in hospitals and hostels for the chronic sick and the aged infirm is a problem which affects many areas of the country; indeed an effective solution to the problem seems impossible without extensive building projects or radical re-arrangement, where possible, of the existing accommodation. An increase in the domiciliary nursing services and home help schemes might help but would leave, at least, part of the accommodation problem unsolved.

In previous annual reports I have discussed the hospital and hostel facilities separately for the management of the hospitals is no responsibility of the local health authority and therefore no responsibility of mine. But while there may be divided administrative responsibility, from a medical viewpoint there is no clear-cut division between the aged sick and the aged infirm for, in general, both groups suffer from the same degenerative changes with only the question of degree separating them. This separation is not always very evident for, in time, the aged infirm worsen and merge imperceptible with the aged sick. Accommodation for this large group of the community, the aged, whether sick or infirm, must therefore be considered as one problem and not two and how much better it would be if the responsibility for the problem was held by one authority, and not two as at present.

I have said that an extension of the local health authority's domiciliary services, while useful, cannot afford a complete solution of the accommodation problem. Home conditions or the absence of a home so often determines the need for hospital or hostel admission and conversely the same factors govern the question of discharge.

It is a common experience that aged people seek hostel accommodation, because they live alone and no longer feel equal to the task, live in lodgings and feel lonely, or live with relatives and feel a burden to the family. A recent survey revealed that two thirds of the aged living in hostels were single, widowed or divorced, a finding which I think underlines the experience which I have just related. Again the discharge from chronic sick hospitals or hostels for the aged is largely governed by home conditions for there must be a home for the aged to return to before discharge can be considered. The longer the aged remain in hospital or hostel the less likely it is that they will have a home, for houses and family life tend to break up with prolonged absence. In considering the residential accommodation requirements for the aged it must be recognised, therefore, that a large proportion of the aged will remain in a hospital or hostel indefinitely for the hospital or hostel will to them become their home. To make the maximum use of both types of accommodation there must be the fullest liaison between the hospitals and hostels to allow of easy interchange of patients as the circumstances dictate. When free interchange between chronic sick hospitals and hostels proves impossible, with neither authority able to help the other, then accommodation problems worsen. Free interchange will always be difficult

with divided control and, in my view, if this divided control is to remain it is essential that both authorities discuss together the whole question of accommodation for the aged, see each other's difficulties and try to formulate a common plan.

At the other end of the scale the question of the availability of sufficient beds in mental deficiency institutions and sufficient places in occupation centres are equally related. The question of how many institutional beds for mental defectives are required is not governed entirely by strictly medical factors but is equally dependent on the home conditions of the defective and the adequacy of the occupation centre provisions. It is most depressing to have to report that no progress whatsoever was made last year in the conversion to an occupation centre, of that part of The Gables, Wombwell, which was previously used as the Divisional Health Office. The need for the conversion has long been proved and accepted by the County Council, the children are waiting and ready to go but apparently the starter, with his gun, is still missing. I'm sure the local community would be grateful for any knowledge of his whereabouts.

Comment on the hospital provision for the acute sick, maternity patients and those suffering from infectious diseases can be brief for the services provided were, as always, both adequate and good.

It is also a pleasure to be able to report that in no instance was it necessary to take action under Section 47 of the National Assistance Act, 1946.

General Hospitals

The general hospitals serving your district are given below. Their administration rests with the Leeds and Sheffield Regional Hospital Boards through the local hospital management committees.

Leeds Regional Hospital Board:

1. Clayton Hospital, Wakefield.
2. General Hospital, Wakefield.
3. Leeds General Infirmary.

Sheffield Regional Hospital Board:

1. The United Group Hospitals, Sheffield.
2. The Beckett Hospital, Barnsley.
3. The St. Helen Hospital, Barnsley.

Infectious Diseases Hospitals

All infectious diseases requiring hospital admission were admitted to the Kendray Hospital, Barnsley. The ambulance arrangements were the same as in the previous year, the hospital retaining its own ambulances for this service.

Maternity Hospitals

Maternity cases were usually admitted to the following hospitals :

1. The St. Helen Hospital, Barnsley.
2. Pindar Oaks Maternity Home, Barnsley.
3. Manygates Hospital, Wakefield.
4. Hallamshire Maternity Home, Chapeltown.

The services of the Jessop Hospital, Sheffield, and the Maternity Hospital, Leeds, were also available for abnormal obstetric cases.

Tuberculosis Scheme

The co-operation between the Chest Centre and the Health Department continued and, consequently, the essential link between the curative and preventive aspects of Tuberculosis was maintained. The two whole-time Tuberculosis Visitors, while employed by the local health authority, had, for practical reasons, their day-to-day duties arranged by the Chest Physician. This very effective arrangement enhanced the value of their work for they came to know the tuberculous patient and his contacts equally and were able to give advice to both alike.

The after-care arrangements included extra nourishment, when recommended by the Chest Physician, in the form of a free milk allowance and bed, bedding and other nursing equipment was issued on loan to patients where necessary. The Home Help service was also available when required.

The programme of the clinics held at the Chest Centre, 46 Church Street, Barnsley, is given below :

- | | |
|------------|-----------------------------------|
| Tuesday, | 10.0 a.m. to 12.0 noon (children) |
| Wednesday, | 10.0 a.m. to 12.0 noon |
| Wednesday, | 2.0 p.m. to 4.0 p.m. |
| Thursday, | 10.0 a.m. to 12 noon |
| Friday, | 10.0 a.m. to 12 noon |

Venereal Diseases

The nearest centre for Royston patients for the diagnosis and treatment of venereal diseases is in Barnsley.

Address: Special Treatment Centre,
Queen's Road,
BARNSELY.

Other centres are situate in Sheffield, Rotherham, and Wakefield, and a patient is at liberty to attend at the centre of his choice. Treatment is completely confidential.

Ambulance Service

The expected formula of increased calls on the ambulance service was again realised last year. Admissions to and discharges from hospitals remained relatively steady as were the transfers between hospitals, but the out-patient traffic once more showed an increase. It is worthy of note, however, that the increase of approximately 17,000 further out-patients carried was the smallest annual increase so far recorded since the inception of the County Ambulance Service. The responsibility for deciding whether a patient needs ambulance transport to a hospital out-patient department rests with the hospital for all journeys other than the original. To ensure the correct usage of ambulances, hospital ambulance officers have been appointed and their co-operation with the ambulance service has done much to keep the out-patient demands within reasonable bounds. The ambulance service, while free to all, is nevertheless costly of operation. The mis-use of ambulances must be avoided, for mis-use not only increases cost but also decreases efficiency.

The increase in the volume of road traffic resulted in a regrettable further increase of 1,720 accidents carried to hospital as compared with 1954.

Two diesel engined ambulances were tried last year and proved both comfortable to the patients and economical in running costs and maintenance. It is expected that 30 more vehicles of this type will be added to the ambulance strength during the current year. A new radio station to be sited in Hoyland has also been planned for completion in 1956, which will give improved radio-telephonic communication in South Yorkshire.

Home Nursing

The Home Nurses in the division made 57,400 visits last year and almost every type of illness came under their care.

The majority of the visits, over 26,000 were to medical cases, 9,000 were to surgical cases and largely represented visits to patients recently returned from hospital after an operation, 700 were to tuberculous patients and the remainder included visits to infectious diseases and puerperal complications. An interesting statistic was the 21,300 injections given by the nurses for widely different diseases and using a wide range of drugs. This astonishing figure, I think, illustrates more clearly than any other statistic the change in the character of home nursing since the war for I venture to suggest that, pre-war, little use was made of home nurses for injection therapy. Indeed the term injection as applied to nursing duties was more commonly associated with the giving of enemata.

Another statistical figure worthy of note was the wide range of the patients visited. At one end of the scale you find the aged sick and infirm receiving almost 60% of the total visits whilst at the other end you find over 1,000 visits were made to children under 5 years of age. It has long been recognised that old people should be treated at home whenever possible and whenever home circumstances allow. It is now becoming equally well recognised that the same preference for domiciliary treatment, as opposed to hospital treatment, should apply to the young child, though perhaps for a somewhat different reason. The extension of home nursing to young children is to be welcomed and is an aspect of home nursing which will assume an ever increasing importance in the years ahead.

Home treatment by the family doctor, aided when necessary by the home nurse, has long been a traditional feature of medical practice in this country and its importance and value to the community is no less today, even though the great advance made in medical science and knowledge has increased the complexity of modern therapy. There has, however, been a tendency in recent years for hospital treatment to be sought more frequently by more people. While there may be many reasons for this, the tendency is to be deprecated if it is to lead to the community as a whole developing a hospital fixation complex. Hospitals are our second line of defence against disease and should not be regarded as the sole repository of medical knowledge. To treat every illness in hospital, irrespective of its nature and causation, would be for the nation a very expensive step backwards. One of the fundamental principles in medicine is to treat the patient rather than his disease, and the application of this principle is easier in the natural environment of the

home than in the more laboratory-like atmosphere of the hospital. An efficient domiciliary nursing service can help to create the right conditions for home treatment and should be given every opportunity with encouragement to expand if necessary.

Home Helps

In most parts of the country the home help service has become largely a welfare service for the aged and infirm, a situation which has arisen not because of a deliberate policy of the local health authorities, but because of the overwhelming needs of the aged as compared with the other sections of the community. The administration of the service, and indeed its future planning is, of necessity, governed by the needs and demands of the aged even if it means, to some extent, sacrificing the interests of the rest of the community. Whether this is a good or bad thing may be a matter of opinion, but it is a practical necessity which probably meets with the full approval of the majority of the people.

Last year almost 90% of the available home help hours were given to the households of the aged and infirm and the demands on the service showed the expected increase. On average, 300 households per week were assisted as against 240 in 1954 and because the authorised establishment of home helps remained unchanged, the average weekly assistance given to aged applicants was reduced from 6-7 hours to 4-5 hours. Indeed, even this figure would not have been possible if additional help had not been obtained from the central reserve pool.

Most people agree that the present residential accommodation for the aged sick and infirm, whether in hospital or hostel, is inadequate and various schemes which will lessen the demand for residential accommodation have been suggested. It has been suggested that some relief in this direction could be obtained if the home help scheme were expanded. I have commented elsewhere on this suggestion, but I must repeat my view that once an aged person requests residential accommodation there is usually no satisfactory alternative which will completely meet his needs and circumstances. If the home help service is to be increased, with a view to relieving the strain on the residential accommodation, then the increase, to be of practical value, must be large. It is for those who hold the financial responsibility to decide on what size the increase should be and I offer no suggestion.

Whatever one's views on what is the optimum domestic help that should be given to the aged there is one medical fact which must be borne in mind. It is bad policy to create conditions which must eventually lead to the aged becoming too dependent on the assistance of others. Old people should be encouraged to retain their spirit of independence and to challenge their physical infirmities by doing as much as they can for themselves. A continued acceptance of life's challenge is of greater importance to the well-being of the aged than the unlimited provision of bath chairs.

Laboratory Service

The laboratory service was provided by the Public Health Laboratory in Wakefield, a national service under the control of the Medical Research Council. The laboratory is equipped to deal with all bacteriological and pathological examinations and a complete investigation is undertaken and report furnished for every specimen sent for examination.

Samples of milk taken under the Food and Drugs Act for chemical analysis were examined by the Public Analyst at Bradford at the expense of the County Council.

Maternity and Child Welfare Service

Though the attendances of children over 1 year of age showed an appreciable reduction, the overall attendance figures for the Infant Welfare Centre were satisfactory. The increase in the ante-natal attendances were particularly noteworthy for, throughout the country, attendances at Local Health Authorities' ante-natal clinics have generally declined over the past few years.

Much has been written about the work of the doctors and nurses at the child welfare clinics. There is, however, a third group of people, who we may describe as members of the unofficial clinic staff, whose work gets little mention though it does much to create that feeling of warmth and friendliness so essential for a successful clinic. This group of public spirited ladies attend the clinic every week, year in and year out, and give their services quite voluntarily for the well-being of the clinic. They help with the preparation of the clinic, with the distribution of record cards, with toddlers, with the raising of funds for Christmas parties and summer trips, with the making of the all-important cup of tea. They are, in fact, part and parcel of the clinic life and they ask for nothing but the pleasure they get from their service. I believe they would feel lost without the clinic but it is right to acknowledge that, equally, the clinic would be lost without them.

Infant Welfare Clinic—Attendances during 1955

		No. of children who attended during the year	Total attendances Under 1 yr. Over 1 yr.	
Wesleyan Sunday School	Wednesday			
High Street, ROYSTON	10 a.m. to 12 noon	371	2,598	1,093
Dr. M. E. Tapissier.	2 p.m. to 4 p.m.			

Ante-Natal Clinic—Attendances during 1955

		No. of women who attended during the year	Total number of attendances made during the year
Wesleyan Sunday School High Street, ROYSTON. Dr. H. W. Gothard.	Tuesday 2.0 p.m. to 4.0 p.m.	100	455

Mental Health Service

The statistics relating to mental defectives in the division are given below:

		Under 16		Over 16	
		M	F	M	F
Statutory Supervision	.....	23	22	43	51
Guardianship	.....	—	—	—	2
Voluntary Supervision	.....	—	—	22	24

The Mental Health Social Workers are statutory bound to visit Statutory Supervision and Guardianship cases at six monthly intervals. However, in quite a number of cases it is necessary to visit more frequently for parents appreciate their help in trying to avert family crises which sometime arise from the defective's behaviour pattern. The Social Workers are always willing to give whatever assistance they can to help smooth out problems which, from time to time, arise in a defective's life.

Perhaps the greatest problem is keeping the defectives adequately occupied for it is the unoccupied defective who is most likely to become beyond parental control. Occupation centres, where the defectives attend daily and acquire a necessary discipline and a sense of social responsibility, are the obvious solution to the problem. Such centres, in addition to helping the defectives, are of equal help to the mothers for it is they who normally bear the brunt of finding suitable occupation and amusement in the home and who, with the establishment of occupation centres, can happily carry on a normal household routine knowing that their children are in capable hands.

At present 15 defectives are attending the Barnsley Occupation Centres and 4 are attending the Hemsworth Centre, but there are still 16 defectives under the age of sixteen years and 20 defectives over that age awaiting admission to Occupation Centres. The extent of the waiting list for admission to an Occupation Centre emphasises the urgent need for the opening of The Gables, Wombwell, as an Occupation Centre and as I have stated elsewhere in the report I regret I can report no progress on this project.

It is intended that the mental defectives awaiting Occupation Centre vacancies from Wombwell, Darfield and Worsbrough, together with those already attending other Centres from these districts will be admitted to the Wombwell Occupation Centre. The vacancies created at the Barnsley Occupation Centre by the withdrawals of the Wombwell, Worsbrough and Darfield defectives will be filled by the defectives from Royston, Cudworth and Darton who are awaiting admission to Occupation Centres.

In an endeavour to give training to the defectives who are awaiting admission to centres a home training programme, under a qualified home teacher, has been devised. The programme includes group training classes and visits to defectives' homes where advice and training is given. I set out below particulars of group training classes in the division.

Day	Time	Place	No. attending
Tuesday,	9.30—4.0 p.m.	The Gables Wombwell.	14
Wednesday,	9.30—4.0 p.m.	The Gables, Wombwell.	14
Thursday,	9.30—2.30 p.m.	Ambulance Hall Worsbrough Bridge.	8
Friday,	10.0—4.0 p.m.	Old Infants' School Darton.	8

It will be noted that no group training classes were provided last year for the Royston and Cudworth children, but this was remedied in May this year when a class was established in Royston and at which 16 children, from Cudworth as well as Royston, already attend. In some instances defectives attend more than one group training class and are showing the benefit of regular training. Training is given in good habits, social behaviour, sense training, handicrafts (knitting, rug making, needlework embroidery, etc.), singing, dancing, speech therapy and household duties. Where defectives will respond training is given in elementary reading, writing, arithmetic, money values, etc.

The shortage of accommodation in mental deficiency institutions and mental hospitals has been mentioned elsewhere in the report, but three vacancies for mental defectives were found last year which were gladly accepted. It is necessary for the mental health social workers to keep under constant review the possible institutional requirements for mental defectives based on an appraisal of the social conditions. There are 16 cases in the division where accommodation will be required in the event of a breakdown in the family pattern and two cases whose urgent claims are being pressed with the Regional Hospital Board.

The Regional Hospital Board, in an attempt to relieve the situation, has from time to time made short-stay vacancies available of up to one month's duration. These short-stay vacancies, even when they do not meet the full requirements of the situation, are nevertheless of considerable help for they give parents a little time for rest and relaxation which, so often, the continual care of a defective child never allows.

A steady rate of employment of high grade defectives has been maintained and 37 males and 22 females are in regular employment. It has been established that some high grade defectives, although taking much longer to absorb a routine job, will eventually give, under supervision, useful service. It is gratifying to find that there are still some employers who knowing the limitations of mental defectives will nevertheless employ them and give them every encouragement in their work.

There has been a steady increase in the work under Section 28 of the National Health Service Act, 1946, and many home visits have been made by the Mental Health Social Workers.

Patients discharged from mental hospitals are visited within one month of their return home to determine whether the improvement in their mental health has been maintained. In the event of a relapse, the patient is referred to the Out-Patients' Psychiatric Clinic at Beckett Hospital. The Mental Health Social Workers attend these clinics, which are held each Tuesday and Wednesday afternoons, and act as the co-ordinating officers between the clinic and the various local health authority departments and do whatever field work is required by the consultant psychiatrist.

Mental Health after-care is a field of work still largely unexplored but the social workers in the division have at least made a beginning, and worth-while results will eventually accrue.

School Health Service

Before giving a brief statistical summary of the work of the School Health Service, I would refer to two aspects of the work to which I made mention in my last annual report and which can now be reported upon in greater detail. As both are directly concerned with the prevention of Tuberculosis, though each approaches the subject from somewhat different angles, the two aspects might better be considered together.

Tuberculin Testing of Primary School Entrants

B.C.G. Vaccination

Both the tuberculin testing of primary school entrants and B.C.G. vaccination of the thirteen-years old group are now an integral part of the school health service, but neither procedure is done without the written consent of the parents. I am glad to be able to state that the percentage acceptance rates in both instances were high. The information yielded by the tuberculin testing of the younger age group has been compared with similar results obtained from the older age group. As the survey appeared to warrant it, an enquiry was also made into the attack rates of tuberculosis in the various districts and the percentage of the population on the Tuberculosis register. A further enquiry was made into the incidence of tuberculous milk in the area.

The findings from the various districts in the survey have been collated by my deputy, Dr. R. Barnes, and are as follows :

Tuberculin Testing of School Entrants

The routine survey of school entrants with a tuberculin jelly test, which was commenced in 1954 in the Wombwell, Worsbrough, Darfield and Dodworth Urban districts, was this year extended to the whole of my Division. I give below details of testings :

DISTRICT	No. of children offered Tuberculin	No. of parents accepting	No. of positive results	% Accep- tance	% Posi- tive	No. referred to Chest Physician
WOMBWELL						
Total No. of children in the Survey	513	396	11	77.2	2.75	11
Totals without known contacts	513	396	11	77.2	2.75	11
WORSBROUGH						
Total No. of children in the Survey	330	280	9	84.8	3.2	4
Totals without known contacts	325	275	4	84.6	1.4	4
DARFIELD						
Total No. of children in the Survey	140	126	7	90.0	5.5	4
Totals without known contacts	137	123	4	89.8	3.2	4
DODWORTH						
Total No. of children in the Survey	93	76	8	81.7	10.5	7
Totals without known contacts	92	75	7	81.5	9.3	7
CUDWORTH						
Total No. of children in the Survey	157	147	6	93.6	4.0	3
Totals without known contacts	154	144	3	93.5	2.1	3
DARTON						
Total No. of children in the Survey	300	225	7	75	3.1	6
Totals without known contacts	299	224	6	74.9	2.6	6
ROYSTON						
Total No. of children in the Survey	160	141	6	88.1	4.2	6
Totals without known contacts	160	141	6	88.1	4.2	6
TOTALS FOR THE DIVISION						
.....	1691	1391	54	82.3	3.8	41
TOTALS WITHOUT KNOWN CONTACTS						
.....	1678	1378	41	82.1	2.9	41

It will be appreciated that these surveys are conducted in association with the school medical inspection programme, which is arranged according to the school year. It is, therefore, inevitable that some schools will be included twice in the calendar year. This does not mean that the same children are included in the survey twice, as only the new entrants are examined.

During the course of this survey many children were found to be positive reactors who were already known contacts of cases of tuberculosis, and who were already attending the Chest Physician for observation. These children represent the difference between the number of positive results (column 3) and the number referred to Chest Physician (column 6). A further line has been added, under the totals for each Urban District, excluding these children from the Survey and representing the number of new positive reactors discovered. This still leaves the Dodworth Urban District with a percentage much higher than all other districts. It was thought that this might be due to a higher prevalence of the disease there and an investigation was made into the attack rate in the seven Urban Districts over the last five years. The results are shown in Table II, together with the proportion of each population who were on the Tuberculosis register at 31st December, 1954.

TABLE II

District	% of Positive Tests	% of (+)ive excluding contacts	Attack Rate /100,000 over 5 yrs.		% of Population on Register at Dec., 1954	
			Total	Pulmonary	Non-Pulmonary	
DODWORTH	10.5	9.3	98.6	93.9	4.7	0.64
DARFIELD	5.5	3.2	143.2	127.3	15.9	0.95
ROYSTON	4.2	4.2	140.3	103.4	36.9	0.52
CUDWORTH	4.0	2.1	105.0	95.9	9.1	0.58
WORSBROUGH	3.2	1.4	99.8	84.3	15.5	0.52
DARTON	3.1	2.6	91.0	77.0	14.0	0.51
WOMBWELL	2.75	2.75	144.9	115.0	29.9	0.81
Divisional Totals	3.8	2.9	119.6	100.9	18.7	0.64

This research does not produce much correlation with the survey, especially in respect of the Dodworth Urban District. It will be noticed that there is poor correlation too in respect of the Wombwell Urban District, but this might be accounted for by a poor acceptance rate in two schools, one of which might be expected to be in an area of high incidence. This, however, is a matter of speculation and cannot easily be proved. When the results obtained from this survey are reviewed, in association with the tuberculin testing of thirteen-years old children for the B.C.G. Vaccination scheme, it can be seen that quite a marked degree of correlation is obtained suggesting that the incidence of a high percentage in Dodworth is significant as seen in Table III.

TABLE III

District	B.C.G. Scheme		Tuberculin Entrants Scheme	
	% Acceptance	% Positive	% Acceptance	% Positive
DODWORTH	98.0	40	81.7	10.5
DARFIELD	99.0	35	90	5.5
ROYSTON	79	23.5	88.1	4.2
CUDWORTH	89	30	93.6	4.0
WORSBROUGH	88	20	84.8	3.2
DARTON	87	30.5	75.0	3.1
WOMBWELL	81	26.5	77.2	2.75
Divisional	85	29.4	82.3	3.8

The next matter to be considered was, whether the milk supply was a factor in this discrepancy. An order was made by the Minister in April, 1953, under Section 23 of Milk and Dairies Artificial Cream Act, 1950, making these Urban Districts, specified areas under the Act. The children in this Survey were mostly born in 1950. It may be assumed that very little raw milk is consumed in the first year of life, but this still means that these children could have been exposed to tuberculous raw milk during two years of their life. A check was made of samples of milk found to be tuberculous over the last five years, but again Dodworth Urban District was not outstanding. It will be interesting to see if the percentage of positive reactors diminished over the next two years, because this will give some guide as to whether milk has been a major factor. Failing this, it must be assumed that this small community contains some undiagnosed foci of infection.

The whole Survey was carried out with the generous co-operation of the Chest Physician. At the end of the year, only two families had failed to co-operate in submitting themselves for clinical and radiological examination at the chest clinic. These families have since agreed to attend. Despite this co-operation and the high acceptance rate for the test, it is surprising that no adult cases were discovered, especially in view of the American results in this type of Survey. Several adults were advised, by the Chest Physician, to attend the Pneumoconiosis Board, but otherwise the results in terms of contact-tracing were poor. Nevertheless, I feel this is a worth-while procedure and that it should be continued because the factor of infection by milk will soon be removed, and in two years time this type of Survey should give some direct correlation with active foci of infection. It must be noted, however, that in some districts (e.g. Worsbrough),

the known contacts of active tuberculosis, accounted for a large proportion of the positive reactors. Throughout the Survey contact with general practitioners has been maintained, and they have been kept informed of radiological and other findings through this office.

Routine School Medical Inspections were carried out by Dr. S. G. A. Henriques at the undermentioned schools:

- Royston County Primary School.
- Royston Church of England J.M. and I. School.
- Royston Junior Girls' School. -
- Royston Junior Boys' School.
- Royston Secondary Modern Girls' School.
- Royston Secondary Modern Boys' School.

Summary of defects found:

School visited	No. of children examined	DEFECTS FOUND						No. passed for Treatment
		Ocular	E.N.T.	Heart	Lungs	Orthopaedic	Others	
Royston County Primary	118	6	26	1	8	1	4	8
Royston Church of England J.M. and I.	74	7	2	1	1	1	8	5
Royston Junior Girls'	68	15	4	—	1	3	8	11
Royston Junior Boys'	55	16	2	—	1	3	5	15
Royston Secondary Modern Girls'	75	18	5	—	2	4	11	14
Royston Secondary Modern Boys'	72	20	2	1	—	1	2	11
	462	82	41	3	13	13	38	64

CLINICS

School Clinics

Wesleyan Sunday School, High Street, ROYSTON	No. of individual children who attended and were seen by Doctor
	311

Specialist Clinics

- Ophthalmic Clinics** (72 sessions held in 1955)
Mr. N. L. McNeil, M.B., D.O.M.S., Ophthalmologist.
No. of children examined 157
- Orthopaedic Clinics** (10 sessions held in 1955)
Mr. T. L. Lawson, F.R.C.S., Orthopaedic Surgeon.
No. of children examined 17
- Ear, Nose and Throat Clinics** (12 sessions in 1955)
Mr. W. L. Rowe, F.R.C.S., E.N.T. Surgeon.
No. of children examined 36
- Paediatric Clinics** (1 clinic per month)
Dr. C. C. Harvey, M.D., M.R.C.P. Paediatrician.
No. of children examined 20

Special Clinics

Speech Therapy Clinic

Mrs. P. J. Battye, L.C.S.T., Speech Therapist (Resigned July, 1955)

No. of children seen	2
Total attendances	37

Child Guidance Clinic

Dr. M. M. MacTaggart, M.A., Ph.D. Educational Psychologist
(Resigned July, 1955)

Dr. S. M. Leese, Psychiatrist (from October, 1955)

No. of children examined	14
Total attendances	31

Sun-ray Clinic (2 sessions per week)

No. of individual children attending	14
Total attendances made	285

Minor Ailments Clinics

No. of individual children treated by Health

Visitors	148
Total attendances	194

GENERAL EPIDEMIOLOGY

There were 295 cases of infectious diseases notified last year as compared with 58 notified in 1954. The main features were the epidemic of Measles in the first half of the year and a minor epidemic of Whooping Cough in the last quarter.

	No. of cases Notified	Admitted to Hospital	Died
Measles	202	1	—
Whooping Cough	85	1	—
Scarlet Fever	1	—	—
Dysentery	1	1	—
Pneumonia	2	1	—
Poliomyelitis (Paralytic)	3	3	—
Acute Encephalitis (post-infectious)	1	1	—
	295	8	—

The following table shows the age distribution of the Infectious Diseases notified during the year.

	Under 1 yr.	1-4	5-14	15-24	25-44	45-64	65 and over	Age Un- known
Scarlet Fever	—	1	—	—	—	—	—	—
Whooping Cough	6	29	49	—	—	—	—	1
Measles	3	100	94	1	—	—	—	4
Dysentery	—	1	—	—	—	—	—	—
Pneumonia	—	1	—	—	—	1	—	—
Poliomyelitis Paralytic	—	1	1	—	1	—	—	—
Acute Encephalitis (post infectious)	—	—	1	—	—	—	—	—

Scarlet Fever

Only one case of Scarlet Fever was notified last year for which the patient made a rapid and uncomplicated recovery.

Measles

There was a large epidemic of Measles in the first half of the year but the disease was generally mild in character and without serious complications. The peak of the epidemic was not reached until the end of April and the majority of children affected were of pre-school age.

Whooping Cough

A minor epidemic of Whooping Cough was reported in the last quarter of the year with the peak of the epidemic reached in the early part of November. 78 of the 85 cases notified during the year occurred during the epidemic period with the 5-9 age group mainly affected. As far as is known, none of the sufferers had previously been immunised against the disease. There was a fall in the number of infants immunised last year due, I believe, to the suspension of all immunisation and vaccination procedures during the outbreak of Polio. The number of infants immunised was 48, a figure which I expect will be improved upon this year.

Smallpox and Diphtheria Prophylaxis

Despite the suspension of all immunisation and vaccination procedures for four months last summer because of the epidemic of Polio, both Smallpox and Diphtheria immunisation returns were satisfactory. The number of infants vaccinated against Smallpox, never a popular procedure with parents and one which is only "sold" to them with difficulty, was 33 or nearly 26% of the infant population. I think this was a very commendable percentage in the circumstances.

The immunisation figures for Diphtheria last year showed little change though there was a slight fall in the percentage of children immunised in the younger age group. The statistics showed that 66.8% of all children in the district between the ages of 0-14 years were immunised with 40.5% of the children in the age group 0-4 years and 78.3% of the children in the age group 5-14 years protected. Every effort must be made to improve the younger age group percentage which still sadly lags behind that of the older children.

Poliomyelitis

3 persons contracted Polio during the epidemic last year in the Barnsley and district area, 2 boys aged 2 and 6 years and a man aged 34 years. All were afflicted with the paralytic type of the disease but the man and the older boy eventually made complete recoveries. The younger boy, unfortunately,

was left with a severe residual paralysis and at the end of the year was still undergoing treatment in an orthopaedic hospital.

A full report on the epidemic has been submitted to the Council previously, but perhaps I may repeat the last paragraph of the report: I wrote—"The epidemic, I think, clearly proved the limited value of general preventive measures when applied to the population. Immediate segregation of cases or suspected cases in hospital proved easy, but the complete surveillance of contacts, if normal industrial commitments were not to be unduly upset, was always difficult. Perhaps the greatest obstacle to prevention was the probable large number of unknown healthy carriers circulating freely amongst the population. The true prevention of epidemic poliomyelitis must rest in the production of a satisfactory prophylactic and the maintenance of a high level of immunity in all ages of the population".

We must all wish the greatest success to the polio vaccination programme embarked upon this year.

Tuberculosis

1 case of Pulmonary Tuberculosis and 1 case of Non-Pulmonary Tuberculosis were notified last year. There was one death from Pulmonary Tuberculosis.

Earlier in the report I referred to the happy co-operation between the Health Department and the Chest Centre. The beneficial effects resulting from this close association is well illustrated in two facets of tuberculosis prevention in which both departments were engaged last year. The first was concerned with the tuberculin testing of all primary school entrants which has as its primary object the tracing of possible sources of infection, discounting milk which, if not coming from tuberculin tested herds, has been compulsorily pasteurised in the district since September, 1953, must lie in the family, for young children do not usually have lengthy associations with any but members of his family. The value of tuberculin testing primary school entrants was dependent, therefore, not only on the full investigation of the tuberculin positive child but equally on the full investigation of all the members of the family. That this proved possible was due to the co-operation of the Chest Physician and the sound common-sense shown by the families concerned.

The second example related the B.C.G. Vaccination of the senior school children which has as its purpose the protection of susceptible young people through the first years of their working life and the difficult years of adolescence.

It is obviously desirable that these young people should be under medical surveillance during this period and the Chest Physician had gladly arranged to undertake this work and to make periodic examinations and X-Ray tests. The success of the scheme will depend on the co-operation of those vaccinated, but I am certain the scheme will not fail through lack of effort by the staff of the Chest Centre.

The fight against Tuberculosis has been waged for very many years, but with the newer and more powerful weapons of treatment and prevention now in our hands victory is assured and maybe is not so very far off.

TUBERCULOSIS—Record of Cases during 1955

	Pulmonary		Non-Pulmonary	
	M	F	M	F
No. of cases on Register at 1st January, 1955	25	15	1	1
No. of cases notified for the first time during the year	1	—	1	—
No. of cases restored to register	—	—	—	—
No. of cases added to register otherwise than by notification	—	—	—	—
No. removed to other districts	1	2	—	—
No. cured or otherwise removed from register	5	1	—	—
No. died from disease	1	—	—	—
No. died from other causes	—	—	—	—
Total at end of 1955	19	12	2	1

Age Periods	NEW CASES		DEATHS	
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
0— 1	—	—	—	—
1— 5	—	—	—	—
5—10	—	—	—	—
10—15	—	—	—	—
15—20	—	—	—	—
20—25	—	1	—	—
25—35	—	—	—	—
35—45	1	—	1	—
45—55	—	—	—	—
55—65	—	—	—	—
Over 65	—	—	—	—
TOTALS	1	1	1	—

ROYSTON (YORKS.) URBAN DISTRICT COUNCIL

SANITARY INSPECTOR'S REPORT

FOR THE YEAR 1955

To the Chairman and Members of the Royston Urban District Council

Mr. Chairman, Madam and Gentlemen,

It is my privilege to submit to you my tenth Annual Report showing the work done in the Sanitary Section of the Public Health Department during the year ended 31st December, 1955.

As on previous occasions, that portion of the Report dealing with the Public Cleansing Service and Salvage refers to the Financial Year ended 28th March, 1956.

Whilst most building materials were more easily obtainable, and it might have been expected that the work of repairing and re-conditioning of property might make more progress, unfortunately, this was not the case as the majority of building labour continued to be employed on the provision of new houses. The retarding of this most important work can only be deprecated. Tradesmen still had no difficulty in obtaining employment on Housing Sites and the marked preference for new work rather than the dirty work of reconditioning existing properties continued. Bonus Schemes also continued to make new work even more attractive. Nonetheless, general repair work was not inconsiderable but the amount of such work remaining to be done grows year by year. Whether it may gather more impetus with the possible slowing down of new building must remain a matter for conjecture, and only the passage of time will reveal the true position in this respect. Continuing increases in the price of materials and labour make repair and re-conditioning work even more expensive, but this aspect will be dealt with more fully in that portion of this Report dealing specifically with Housing, and the effects of New Legislation so far as Rents are concerned will also be considered. There can be no doubt whatsoever that pressure will have to be brought to bear, where such action is found necessary, to enforce Owners who have allowed their property to become dilapidated to repair it and bring it back to Standard before the ravages of time and polluted atmosphere make it impossible to do so. Speaking generally, Owners and Agents comply with Informal Notices to carry out repairs, but the odd cases remain where threats of Formal Action are necessary before works of repair are undertaken.

Quite a number of houses, which, had they been even reasonably maintained, but which have not been so maintained, will require large expenditure to bring them back to standard, minor repairs are totally inadequate, and the time is fast approaching when, failing complete re-conditioning, the only action remaining will be to take steps for the houses to be demolished.

As has been mentioned in earlier Reports, the deterioration of fabric of houses due to the heavy pollution of the atmosphere is dealt with in more detail in that portion of this Report dealing with Smoke Abatement. Older properties show only too clearly how seriously atmospheric pollution affects the fabric of buildings, but those properties which have been properly maintained indicate the wisdom of tackling the trouble before decay becomes too far established. Domestic chimneys continue to pour filth into the atmosphere and it is difficult indeed to persuade tenants of the folly of firing chimneys rather than to have them properly swept. One can but hope that persistently drawing attention to this matter, will, eventually, bear fruit. The question of concessionary coal cannot be overlooked in this respect, but this will be dealt with more fully later in this Report.

VERMINOUS HOUSES

As in previous years, this matter continued to receive attention and complaints of various types of infestation did not show any material change from previous years except for the fact that not one complaint of bed bug infestation was received.

Whilst the number of complaints of cockroach infestation received was greater than last year, such complaints were neither as numerous nor as widespread as was the case only a few years ago.

During the year, the following properties were dealt with :—

<i>Type of House</i>	<i>Infested</i>	<i>Disinfested</i>
Council Houses	3	3
Other Houses	18	18

Treatment of infested properties followed similar lines to those used in previous years, and tenants of infested houses were found to be even more ready than ever to avail themselves of the services established some years ago whereby small quantities of insecticidal powder were issued.

The prolonged dry summer resulted in the cricket infestation on the Council's Refuse Tip becoming very considerable and this was most apparent on those portions of the Tip where adequate covering material had not been available to dress the faces.

In spite of this, however, those faces of the Tip which had given rise to most trouble in the past but which had eventually been adequately covered remained clear of infestation, and every effort was made to obtain suitable covering material. Treatment of exposed faces was maintained and with beneficial results. With even more new houses becoming available for occupation so, also, did the amount of garden refuse increase and continued appeals to householders to burn such refuse met with little or no response. Evidences of fire became evident in the disused part of the Tip during the very hot weather, and this proved to be quite considerable. It is interesting to note that in that part of the tip where first evidences of fire were noticed, considerable quantities of hedge clippings, etc., were found, and these had not rotted away by virtue of being completely covered. I am satisfied that very slow combustion had been going on for some considerable time and this was accelerated when covering material cracked during the long dry weather and so became apparent. Mechanical aids had to be employed to prevent the fire eating further into the Tip, but with the wholehearted co-operation of the National Fire Service over quite a prolonged period, the fire was not only got under control but actually put out.

No new cases of bug infestation in Council houses was found during the year, and houses found to be infested with bed bugs in previous years showed no evidence of either continuing or re-infestation.

Small quantities of insecticide powder continued to be issued during the year and continued to be fully appreciated by tenants of houses with different types of infestation by domestic pests. The number of complaints of cockroach infestation showed some increase during the year but even so, the number of such complaints received was very much less than was the case only a few years ago, and I am satisfied that the widespread cockroach infestation affecting almost the whole of the District a few years ago is being brought ever more under control, and tenants now realise that in serious infestations, eradication can only be effected by prolonged and sustained effort and that patience is essential in dealing with these infestations if successful treatment is to be carried out.

TRANSFER OF TENANTS TO COUNCIL HOUSES

The system whereby the houses and effects of tenants selected as tenants of Council Properties, both new and existing, were inspected for the presence of vermin prior to removal continued throughout the year under review.

123 houses were inspected in this respect, and except in one instance, no suspicion of infestation was found. In the isolated case, evidences of an old infestation was found, but further investigation revealed the fact that no "live" infestation was present. As a precautionary measure, however, the whole of the furniture was sprayed thoroughly, and check visits confirmed the fact that no live infestation remained.

SANITARY CIRCUMSTANCES OF THE DISTRICT

(a) Water Supply

Water continues to be supplied in bulk by the Barnsley Corporation, and this matter is dealt with by the Surveyor in his capacity as Water Engineer.

(b) Closet Accommodation

Particulars of the various types of sanitary conveniences in use in the District at the end of 1955 are as shown below :—

<i>Type</i>	<i>No.</i>
Pedestal water closets	2778
Privies	44
Chemical Closets	2

During the year, 6 additional water closets were provided for existing properties and 134 were constructed for new houses.

No privies were converted during the year, but following the laying of sewers on the Doles Housing Estate, informal approach was made to the owners of the houses known as 58 to 98, High Street, with a view to the privies serving these houses being converted to the water carriage system of drainage. Although finality had not been reached at the end of the year under review, quite distinct progress was able to be made, but the final outcome will be a matter for a subsequent Report. So far as other remaining privies are concerned, in most instances, difficulty is experienced owing to inaccessibility of sewers, but where there is any possibility of adequate drainage being available or able to be made available, approach will be made to owners to convert privies.

Once again, owners of houses on what was previously known as Lee Lane, which houses are served by cesspools which the Council have not undertaken to cleanse, approached the Council with a view to the Council accepting responsibility for the cleansing of the cesspools. Having given the matter serious consideration, the Council advised the applicants that they could only adhere to their previous decision that the owners of these houses must continue to be responsible for cleansing their own cesspools.

(c) Public Cleansing Service

The following report on the Public Cleansing Service is for the Financial Year ended March, 1956.

Details of the various types of refuse receptacles in use in the District at the end of the year were as shown below :—

Dustbins	2481
Dry Ashpits	Nil
Privy Middens	32
Chemical Closets	2

The cleansing of the privies remaining in the District continued, as in earlier years, to be carried out by the Public Cleansing Staff, and regular cleansing, once per month is tried to be maintained. The members of the Public Cleansing Staff carrying out this work do so before normal working hours, and work overtime so to do. This system works well and ensures that the work is completed before most people are about and minimises nuisance arising so far as reasonably possible. This system allows normal cleansing of the District to proceed smoothly and without disruption.

The following Table gives details of the number of refuse receptacles emptied during the year, together with the number of loads and their estimated weight.

Receptacles	No. Emptied	No. of Loads	Estimated Weight		
			T.	C.	Q.
Dustbins, etc.	128,823	1865	5035	10	0
Privy Middens	325	76	243	4	0
Trade Refuse		173	86	10	0
TOTALS	129,148	2114	5365	4	0

The labour position, to which passing reference was made in the Annual Report for 1954, became very much worse during the year under review. For years, except in minor instances, the Council's Public Cleansing Staff had worked unobtrusively and well, but a severe set-back occurred and it was only with the utmost difficulty that the Cleansing Service was able to be maintained. For quite a long period, the Service was short staffed, but those men remaining at work managed to keep the job going although from time to time, overtime had to be worked to prevent serious accumulations of refuse. Once again, I feel I would be failing in my duty if mention and appreciation of the loyalty of these men was not made. I can but hope that the labour difficulties will soon be overcome as recurrent staff shortages is giving rise to serious discontent amongst the regular workers.

The provision of further houses continues to increase the work of the Public Cleansing Staff and as such houses are either detached or semi-detached, set well back from roads, the long carries continue to make the work of emptying dustbins ever more arduous. In view of the progress made on the Doles Housing Estate, and the automatic increase in the amount of work at the Tip, the Public Cleansing Staff was increased towards the end of the year, the man employed dividing his time between cleansing of Public Conveniences, assisting on the Cleansing Vehicle and also giving assistance at the Tip.

For some years past, regular weekly collection has been maintained, and every effort will be made to maintain this standard. There can be no doubt that the men engaged on this vitally essential aspect of environmental hygiene do not suffer the stigma which attached to their predecessors, and rightly so, but even so, and even with increased rates of pay, recruitment of suitable labour for the work has become increasingly difficult. At one time, the possibility of working a five day week was considered, but it was felt that, especially during the times when privy cleansing is carried out, the longer hours of work would be too fatiguing. In an essentially mining area such as this, where men employed at the local collieries work a five day week and other industries follow suit, men seeking employment invariably ask whether Council workmen also work a five day week, and when told that a six day week is worked, their enthusiasm appears to suffer a set-back. I am satisfied that householders appreciate the service given them by the Public Cleansing Staff, and this is amply borne out during times of inclement weather or when staff shortages occur due to sickness resulting in the work getting slightly in arrears, by complaints being received of dustbins not being emptied to time.

COSTING

House and Trade Refuse	Collection £ s. d.	Disposal £ s. d.	Totals £ s. d.
Wages	2438 11 1	535 15 1	2974 6 2
Petrol and Oil	161 4 3	— — —	161 4 3
Spares, repairs, etc.	212 16 3	38 10 1	251 6 4
<hr/>			
TOTALS—EXCLUDING General Administrative Charges and Depreciation	2812 11 7	574 5 2	3386 16 9
<hr/>			
Cost per ton	10 6	2 2	12 8
<hr/>			
General Administrative Charges and Depreciation	311 9 10	33 0 5	344 10 3
<hr/>			
TOTAL COST—INCLUDING General Administrative Charges and Depreciation	3124 1 5	607 5 7	3731 7 0
<hr/>			
Cost per ton	11 8	2 3	13 11

Estimated Population (Mid-summer 1955—	
Registrar General's figure)	8,110
Number of houses or premises in the District	2,914
Rateable Value of District	£32,250
Product of 1d. Rate	£120/15/11
	T. C. Q.
Total Tonnage Collected	5365 4 0
Output of Refuse per 1,000 population per annum	661 10 0
Output of Refuse per 1,000 population per day	1 16 1
Average length of haul	1 mile

Based on the estimated weight, the weight of domestic refuse collected per 1,000 population per day was approximately 35½ cwts.—a slight reduction on the previous year, this in spite of the considerable number of new houses which came into full occupation during the year, and continues to show a steady decrease on earlier years. The quality of concessionary coal continued to be better than a few years ago with an automatic decrease in the amount of heavy contrary matter in domestic refuse. It appears both reasonable and logical to assume, therefore, that the replacement of old, obsolescent and inefficient solid fuel burning appliances with new appliances with better fuel burning properties reduces the amount of refuse to be collected. Even so, figures continue to remain high but, as has been stated in earlier Reports, this could be because of the vast majority of households in the District being in receipt of concessionary coal, and as is well known, the quantity of coal supplied to houses where the tenant is employed in or about the mines continues to be considerably more than other householders are allowed with the result that the economy exercised in the use of coal in these houses is much less than would otherwise be the case.

It is again pleasing to be able to report that the replacement of obsolete and inefficient solid fuel burning appliances apparent in recent years continued during the year under review, and advice continued to be sought on the type of appliance to be installed.

On the vexed question of the amount of combustible material remaining in refuse. I regret that this matter continues to give cause for alarm. Modern appliances result in much finer refuse, but where modernisation has not been carried out, it would appear that the truth of the statement that old habits die hard is proved time and time again. So far as new houses are concerned, whilst the quantity of partly burned coal in dustbins has decreased, the quantity of garden refuse and hedge clippings has continued to increase greatly and evidences of heating in the Refuse Tip were apparent all too often. As has been stated earlier in this Report,

on one occasion during the year, serious fire occurred in the Tip and undigested garden refuse was apparent where the fire broke through.

In calculating the cost per ton, no allowance is made for income from the sale of salvaged materials. Income from this source during the year showed a slight increase, a total of £187/11/5 being realised, but details of this appear in that portion of this Report dealing with Salvage. This income reduces the cost per ton (collection and disposal) by slightly more than 8d.

The cost of the Public Cleansing Service, expressed as Cost per ton (Collection and Disposal) shows quite an appreciable increase during the year—13/11d. for the year 1955/56 as against 11/10d. for the year 1954/55. The increase is due to considerable increase in wages, increased vehicle running and maintenance costs and to the increase in the personnel of the Public Cleansing Staff. In spite of this, I am still of the opinion that Public Cleansing Costs in this District will compare favourably with those in adjoining Districts.

SALVAGE

As in previous years, separation of various classes of Salvage continued to be an integral part of the Public Cleansing Service.

Whilst it was possible to find a market for various classes of material recovered from domestic refuse, the demand for the various materials fell away. In spite of this, income from this source rose to £187/11/5 as against £111/9/7 for the Financial Year 1954/55.

The mutual arrangements between householders and pig and poultry keepers in previous years continued during the year, but, so far as I am able to ascertain, such arrangements are dwindling.

SALVAGE STATISTICS
Year ended March, 1956

Material	Weight				Value		
	T.	C.	Q.	Lbs.	£	s.	d.
Paper	34	5	1	0	179	5	0
Rags, etc.	10	1	13		4	1	5
Ferrous Metals	1	14	0	0	4	5	0
	36	9	2	13	187	11	5

The quantity of paper recovered showed an appreciable increase on that recovered during the year ended March, 1955, but a fall in price naturally reduced the value of this material. As in previous years, the quantity of rags finding their way to the Tip continued to decline, but, as has been stated in the past, the number of people, generally from outside the District, who collected large quantities of this material, increased even more. I am glad to be able to report, however, that in no instance during the year were toys found being exchanged for rags.

DISINFECTION OF HOUSES AFTER INFECTIOUS DISEASES

The practice established over the years continued during the year under review, and disinfection was carried out at houses as found to be necessary. The number of instances where disinfection was requested, other than following the notification of a case of infectious disease fell still lower, but, whenever such applications are made, they will always be attended to.

SANITARY INSPECTION OF THE DISTRICT

(1) Number and Nature of Inspections

The following Table gives details of the number and nature of inspections carried out during the year :—

Nature of Inspection	No. of Visits Paid
Housing	
Housing and Public Health Acts	4498
Verminous Premises	359
Miscellaneous Housing Visits	855
Works in Progress	860
Meat and Food Inspection	
Slaughterhouses	673
Shops and Stalls	20
Butchers	135
Fishmongers and Poulterers	22
Grocers and General Dealers	54
Greengrocers and Fruiterers	30
Ice-Cream Premises	36
Food Preparing Premises	159
Restaurants and Canteens	15
Miscellaneous Food Visits	249
Infectious Diseases	
Inquiries and Disinfection	19
Miscellaneous	47

General Sanitation

Water Supply	64
Water Samples	9
Drainage	300
Stables and Piggeries	27
Fried Fish Shops	74
Civil Defence	12
Barnsley Canal	150
Factories	53
Cemetery	43
Bakehouses	18
Public Conveniences	84
Refuse Collection	293
Refuse Disposal	120
Rats and Mice	289
Crickets	25
Licensed Premises	10
Miscellaneous Sanitary Visits	440
Interviews	1304
Salvage	130
Petrol	87

Total Number of Visits 11573

(2) Complaints Received

During the year, 302 complaints were received, details of which are as shown below :—

Nature of Complaint	No. Received
Choked drains	122
Defective cone joint	3
Defective W.C. Pedestal	3
Defective W.C. Service Pipe	8
Defective W.C. Apartment	2
Defective Inspection Cover	2
Defective vent shaft	2
Overcrowding and/or Bad Housing Conditions	15
Defective range	8
General Disrepair	8
Smoke Nuisance	18
Water Nuisance	3
Defective chimney	2
Defective roof	2
Dirty house	1
Subsidence	8
Defective sash cords	2
Defective oven	5
Defective skylight	2
Defective door	4

Nature of Complaint	No. Received
Defective wash copper	1
Defective sink	3
Defective window	1
Defective ceiling	3
Rats	28
Choked sink wast pipe	1
Dampness	8
Dry Rot	1
Mice	7
Rabbits	1
Cockroaches	19
Silverfish	2
Crickets	5
Ants	1
Wood Boring Beetle	1
	<hr/> 302 <hr/>

FACTORIES ACTS, 1937 and 1948

There were no variations in the Register during the year, no premises being added to or deleted.

Premises included in the Register were inspected as opportunity afforded during the year, 53 inspections being made in this connection.

No complaints of uncleanness were received from H.M. Inspector during the year, and only one case was found as a result of routine inspection, conditions being remedied as a result of informal action.

No notifications were received under the provisions of Sections 110 and 111 of the Factories Act, 1937 (Outworkers).

The following Tables are extracts from the Form of Return submitted to the Ministry of Labour and National Service.

PART I OF THE ACT

1. **Inspections** for the purposes of provisions as to health (including inspections made by Sanitary Inspectors).

Premises	Number	Number of		
	on Register	Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	12	53	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority ...	—	—	—	—
(ii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ...	—	—	—	—
Total	12	53	—	—

2. Cases in which Defects were found

Particulars	No. of cases in which defects were found				No. of cases
	Found	Remedied	Referred To H.M. Inspector	Referred by H.M. Inspector	Prosecu- tions were instituted
Want of cleanliness (S.1)	1	1	—	—	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable Tempera- ture (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)—					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	—	—	—	—	—
(d) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to outwork)	—	—	—	—	—
Total	1	1	—	—	—

During the year, arrangements were made for inspections of all Factory Premises in the District by the Members of the Council in order that they might have a better knowledge of conditions in the local factories and also have closer contact with local employers of labour, and to my mind, both are essential.

SMOKE ABATEMENT

It is my pleasure, yet again, to be able to report that no nuisance from smoke, arising in the District, was noted during the year under review, but Nuisance both from smoke and grit arising outside the District continued. So far as the persistent smoke nuisance from the Monckton Colliery Unit is concerned, having in mind the very considerable works at present being carried out at this Colliery, one can but hope that modernisation of the steam raising plant will be included in the programme which would alleviate this trouble. Information is not available as to the methods of stoking employed or of the fuel used, but I am still firmly of the opinion that even with ageing plant and using inferior fuel, efficient stoking without the emission of dense clouds of black smoke can and should be effected, and one cannot but wonder how few boiler firemen take advantage of the opportunities afforded to undergo a course of instruction in boiler firing and boilerhouse practice which I am informed the National Coal Board sponsor.

The question of grit nuisance is not so readily overcome but I am more firmly of the opinion that this arises from the quenching tower and, until such time as some means is evolved for some type of grit arrestor suitable for use at such plants, so must trouble continue. Such arguments whilst sound in themselves do little to pacify irate housewives particularly on washdays.

On the wider aspects of Smoke Nuisances, remarks made over the years continue to hold good especially those remarks concened with adverse factors affecting the District. Smoke drifts over the District persistently from stacks, burning spoil banks and the Coking and By-Product Plants both at Monckton and the Wharnccliffe Woodmoor Colliery according to the wind direction, and, so far as the Coking Plants are concerned, until some method is found practicable and adopted to minimise serious Nuisance during the time that re-charging of Retorts is in progress, so must this heavy fouling of the atmosphere continue.

Remarks made in previous years of the pall of smoke arising from domestic chimneys continues to hold good in part. In those parts of the District to which reference was made last year where old, inefficient solid fuel appliances were replaced by modern appliances, the quantity of smoke certainly appears to be less, but whilst less dense smoke issues from these house chimneys, it is with regret that I have to draw attention to the quite numerous occasions on which tenants fired their chimneys instead of having them properly swept. Apart from the nuisance this practice gives rise to, damage is also caused in flues which eventually will, in all probability, result in smoke nuisances within houses due to damage and deterioration to stack internal brickwork. Where new appliances have been installed, tenants have readily admitted that these are more economical in the use of fuel and are a boon to the housewife who no longer has the drudgery of black-leading. The increased efficiency with which fuel is burned also results in much heat which was previously lost up the chimney being utilised for the heating of water in domestic hot water systems, and tenants of Council Houses which have been modernised have benefitted by the improvement to their houses in this respect and have had no hesitation in saying so. Whilst it is possible to advise and recommend the use of smokeless fuels in some households, I fear that not a great deal of success could be expected, even if adequate supplies of such fuels were readily available, from householders in receipt of concessionary coal. As has been said in previous years, in Districts such as this, where the vast majority of male labour is employed in or about the collieries and concessionary coal is and has been regarded as part of the wage structure for many years, to suggest that this concession should be relinquished and smokeless fuel obtained would simply be asking for trouble, and at the

same time, variations in this aspect would not readily be put into operation by virtue of the fact that not all houses occupied by colliery workers are provided with modern appliances. The whole question bristles with difficulties and is one which I would not venture to speculate upon. At the same time, it must remain a matter for consideration at the highest possible level, especially bearing in mind impending legislation dealing with Atmospheric Pollution, and I have not the least doubt that the responsible Authorities will already be giving the matter earnest consideration, and only the passage of time will reveal what steps, if any, can be taken in this respect.

FOOD AND DRUGS ACT, 1938

As in previous years, the various premises registered under the provisions of Section 14(2) of the Food and Drugs Act, 1938, were inspected from time to time during the year, and details of the premises inspected as shown in the Table of Inspections earlier in this Report. Except for minor matters which were able to be remedied as the result of very informal action, all premises were found to be in a generally satisfactory condition.

There were no prosecutions during the year.

HOUSING

During the year under review, 753 houses were inspected for defects within the meaning of the Public Health and Housing Acts and as a result of Repairs Increase Notices being received by tenants from Owners and Agents of property, 4451 visits being made for the purpose.

Whilst some progress with the repair and reconditioning of existing properties was able to be made, not as much progress was actually made as I would have liked. In the vast majority of cases, very informal approach resulted in repairs being carried out, but in some instances, fortunately very few in number, the reverse was the case and open resentment was expressed when some Owners were requested to carry out works of repair. External painting of houses was even more apparent during the year and this served to brighten up the District if even only for a comparatively short time. The effects of the heavily contaminated atmosphere quickly becomes apparent, and houses which had been repainted within the last twelve to eighteen months already have lost the bloom of the new paint, but this, to my mind, only emphasises the necessity for regular painting not only to relieve the dinginess consequent upon heavily polluted atmospheres but also to protect and preserve materials constantly exposed to such pollution. The tendency to flush doors which had been previously panelled continued during the year and

appeared to be gaining in favour. Such doors, after flushing and painting not only improve the appearance of a house, but reduces the parts of doors where decay can start. Provided the main portions of the door are reasonably sound, this practice should extend the life of doors, but in many cases I fear that rotting of the timber would have progressed too far for this action to have much of a saving effect. The passage of time will show, however, whether or not flushing of doors is of much benefit. It is of little value if timber has been allowed to deteriorate almost to the stage of dropping apart to just cover it up and expect facing material to hold it together. It would certainly appear, however, speaking generally, that more people, both property owners and agents, realise the wisdom of renewing external painting, not just from the point of view of decorative effect, but more so from the standpoint of preserving timber against the elements.

The question of re-conditioning and rehabilitating older properties continues to be as vexed as ever. The economic factor looked upon solely as the return of income from investment remains as thorny a problem as ever. The ever increasing cost of labour and materials in many cases retarded the work of repairing existing properties and when Owners were interviewed after the service of Notices, a persistent plea was the inadequacy of rent income, after the payment of rates, to pay for repairs. Much could be said on this matter, but discretion is, perhaps, the better part of valour.

Although the Housing Repairs and Rents Act of 1954 has now been in operation well over a year, so far as this District is concerned, it does not appear to have come up to expectations, and whilst Notices of Repairs Increase were served upon tenants readily, Certificates of Disrepair apparently gave rise to a very different attitude. Whether further amendment of the Law will clear anomalies which have arisen is a matter for the future. The serious deterioration of fabric due to lack of maintenance coupled with the heavily polluted atmosphere became ever more apparent, but the continuing heavy demands on building labour for the provision of new houses resulted in a totally inadequate labour force being available for repair and maintenance work. Furthermore, skilled craftsmen had not the least difficulty in changing jobs.

As was the case in the previous year, Contractors when pressed to execute works of repair admitted that they were having to refuse work owing to shortage of labour. The marked preference for new work rather than dirty jobbing work shown by men employed in the building trades continued during the year, but one cannot but wonder what the position will be when fewer new houses are built. The demand for new houses appears to continue unabated, but one can only hope that when

this position begins to ease that with the return of a much larger building labour force to repair and maintenance work, very many more houses which are capable of and justify overhauling and modernising will be brought up to standard and provide really good housing accommodation for quite a number of years to come, provided, always, that reasonable maintenance to fabric is carried out.

A by no means inconsiderable amount of repair work was carried out during the year, and the rate at which defective eaves gutters in particular were attended to increased. It is both pleasing and gratifying to be able to report that an ever increasing demand on time, by virtue of both Owners and Contractors seeking advice, was apparent during the year making the demands on time very much worthwhile.

More evidences of damage to properties by Mining Subsidence became apparent during the year, and in some instances, very serious and rapid damage was found. Houses which had been extensively repaired by the National Coal Board less than a year ago again suffered damage but up to the moment, the area of damage appears to be mainly confined to that portion of the District from Army Row to Alfred Street. The close liaison with both Coal Board Officials and Owners of earlier years was fully maintained and on several occasions, joint inspections of properties affected were made. Houses showing evidences of movement on previous occasions were kept under observation and where further damage was seen, advice was given to the Coal Board immediately. With the increase in the rate of mineral extraction, it appears reasonable to assume that more movement can be expected and more properties damage. Houses in Godley Street and at the lower end of Midland Road, all of which had been repaired on several occasions by the National Coal Board were again damaged, and other than carrying out "First Aid Repairs" to try to keep the houses reasonably habitable, little more could be expected, but I am advised that when movement ceases more lasting works of repair will be done.

With the completion of houses on the Doles Site an increasing number of complaints of bad housing conditions were received. The complaints were investigated and reports on the conditions found reported to the Housing Committee for consideration when tenants for houses were selected and 14 families which had been reported upon in this manner were re-housed. Even after the progress made with providing new houses, the number of instances where two families occupy the same house does not seem to diminish as might have been expected. Cases where young couples were having to live apart because of insufficient accommodation still kept coming to light. The number of instances in which young couples, with a young family,

occupied a single room as a separate dwelling did not appear to be so numerous, and this did give some measure of satisfaction. Viewed as a whole, the question of overcrowding does not appear to vary a great deal from year to year, but with a continually moving population in and out of the District, a true assessment is not easy to arrive at. The cost of providing new houses continues to increase and, automatically, rents chargeable for such houses must also be higher. The fears expressed in previous years of the likely strain on the financial resources of young newly married couples obtaining the tenancy of such highly rented houses proved to be true and many cases came to my notice in this respect. Where overcrowded cases have been re-housed and where tenants have been granted the tenancy of new Council Houses much disappointment was felt when the houses such families had occupied, instead of being let, preferably to young couples with limited means, were immediately offered for sale and in some cases stood empty for long periods. In quite a number of cases, young couples decided to purchase such houses rather than either live in lodgings whilst waiting to be granted the tenancy of a Council House, and when repairs because of bad weather became necessary, they were faced with difficulty owing to shortage of money with which to meet substantial bills. In other cases, the difference in cost between an old house and a new one was used to modernise old property with really satisfactory results.

The question of moral overcrowding must continue to be a source of real concern as well as a grave social problem. The re-housing of larger families occupying two bedroom type houses in three bedroom type Council Houses has had the effect of relieving some cases, but one can but wonder whether this is merely a palliative rather than a true cure, but for a period of years, at least, conditions will be somewhat better than would otherwise have been the case. Nonetheless, where more than one family, often where the daughter or son of the tenant marries and stays at home because of being unable to obtain separate accommodation, and where there are other children in the tenant's family, and sleeping accommodation is severely limited, unsatisfactory conditions must prevail. Even without more than one family occupying one house, a mixed family of adolescents in a house with limited sleeping accommodation presents its own problems although several instances came to light during the year where tenants had made a very real effort to ensure privacy under such trying circumstances.

Parents are by no means placid under such circumstances, are very conscious of their difficulties and have left me in no doubt as to their being worried by the inability to find a ready

remedy. As has been said in earlier Reports, where such families occupy houses providing only two bedrooms with but a living room and scullery on the ground floor, adequate and proper separation of the sexes is well nigh impossible, and a difficult and unsatisfactory position is considerably worsened when male members of the family work "shifts". Even so, some progress can be claimed in the number of such families re-housed during the year under review in new houses on the Doles Estate.

During the year, the Council's proposals for dealing with insanitary, unfit houses during the next five years or so, were submitted to the Ministry of Housing and Local Government and were approved, but it may be found that more houses than at present scheduled for demolition will come within this category because of lack of maintenance, and some houses which have been scheduled for possible demolition may have to be taken from the proposals by virtue of their being re-condition and modernised. Economics will have to be borne in mind in dealing with houses which have outlived their usefulness as, in quite a number of cases, the limited means of tenants will, quite possibly, preclude their accepting the tenancy of a new Council House simply on account of high rent. Furthermore, it is already known that some tenants of houses proposed to be dealt with within the first five years have previously been Council House tenants but left their Council House simply and solely because of the rent of such houses. As I see the position, therefore, more and more difficulties will arise, but they will have to be met and overcome as and when they do, in fact, arise. The effects of living in these sub-standard houses may not be apparent at the moment, but no doubt can be entertained that sooner or later ill effects will become apparent. This is a serious matter, especially where young children are concerned, who must spend their early days in dark, damp, insanitary houses, and many parents have expressed themselves extremely forcibly when complaining of recurrent colds and ill-health in their children which they do, quite rightly in my opinion, attribute to the conditions under which they are living. The rate at which progress can be made in the removal of such houses must remain somewhat speculative at the moment as the whole position is irrevocably tied up with the question of the cost of providing new houses and the rate at which such houses may be built. No doubt by the time the next Annual Report is prepared more definite information on this point will be able to be given.

Whilst it must be admitted, although unwillingly, that such houses do at least continue to provide shelter and allow families to occupy their own house instead of having to live with other families, taken as a whole the position can only be regarded as unsatisfactory. As has already been stated, the fear of families

in the lower income groups possibly tending to drift back from new Council Houses to older houses at very much lower rents becomes more apparent, but it is remarkable how even comparatively young children rebel against such a step and resent the loss of amenities provided in Council Houses. Credit has to be given to tenants who leave Council Properties because of inability to pay high rents rather than accumulate debts which they feel they would have little hope of clearing.

As Members are aware, when tenancies of houses provided by the National Coal Board, outside the District a few years ago, were able to be accepted, quite a number of applicants for Council Houses accepted such tenancies as they were in doubt as to when they might be offered the tenancy of a Council House. After living outside the District for a period they have expressed a strong desire to return to the District where they were brought up so as to be nearer their friends, and a considerable number have renewed their applications for the tenancy of a Council House, as a result of which application lists for Council Houses, even after the number of new houses provided since building again became possible, show little signs of diminution. In view of this, if such applicants are to receive consideration in the near future, the future housing needs of the District is a question not easy of determination and must, at least for the time being, remain somewhat in abeyance. Coupled with this aspect, one has to continually bear in mind young couples who marry, have families, and require their own homes and with the increasing expectation of life, so do more older people also require houses and so, for some further years to come, provision of houses must remain a matter of constant duty of local authorities. In considering older people, one cannot but wonder whether the provision of an increasing number of bungalows ought to have more consideration, and, if bungalows were provided and the houses so vacated could be let to young couples on the Housing Waiting List, then some real progress could be looked forward to, and whilst this could readily apply so far as Council owned Property is concerned, having in mind recent experience when tenants are re-housed from privately owned properties and the houses vacated are immediately advertised for sale, satisfactory progress in re-housing older people could quite easily result in an ever increasing number of older properties standing empty for prolonged periods of time without visible reduction in Council Waiting Lists. The whole problem must, therefore, continue to bristle with difficulties, but some means may be able to be formulated which would clarify the position and give a much clearer position of what work in this respect will be required to be undertaken within the next few years.

Whilst Owners and Agents of property showing evidences of serious dilapidation and decay are naturally reticent of committing themselves to considerable expense, when they have sought information as to the possible continuing life of property they are interested in, such information as is able to be given is readily supplied and where properties have been included in the list of possible demolitions, this information is also supplied but it is always stated that it is not possible, at the moment, to give precise information as to when formal legal action leading to the demolition of the houses is to be started. Seeking of information in such cases is wise as considerable amounts of money could be spent to no real advantage, and, until the time arrives for dealing with such houses, Owners and Agents are advised that other than keeping the houses reasonably weathertight, undue expense should not be incurred. On the other hand, some Owners who could, by spending only a comparatively small amount of money give their property a substantial continuing life will only do so when pressed to the extreme, and, if maintenance of such houses is not undertaken in the near future, the only course left open will be to take action simply by reason of the fact that minor repairs will no longer be effective and the cost of the major works will be prohibitive. During the year, as a result of Informal Action, further Undertakings were able to be obtained from Owners to the effect that if tenants of sub-standard houses are re-housed by the Council, the houses will not be re-let but will be demolished. By this means, rather more than a quarter of the Council's Five Year Programme will be able to be carried out without the long legal procedure attendant upon declaration of Clearance Areas.

During the year, two houses in Back Lane which had previously been included amongst that to be demolished and in respect of which an Undertaking had been received from the Owner, were demolished, the tenants being re-housed, one on the Chevet View Site and one on the Doles Site. One house, in respect of which an Undertaking had been received, the house known as 39/41, High Street, was closed following re-housing of the tenant on the Doles Site, and the house will be demolished after two other houses adjoining become vacant.

Taken as a whole, therefore, the Housing Position does not seem to be a great deal clearer but rather more complex. One can but hope, therefore, that by the time another Report is prepared the outlook will be much more satisfactory.

No action was taken during the year under the provisions of Section 20 of the Housing Act, 1949—Improvement Grants.

During the year, following a complaint from the Agent of the very unsatisfactory state into which a house had been allowed to fall, inspection revealed distressing conditions. The tenant of the house, and his wife, were both advancing in years, and it was apparent that the work of keeping the house clean was beyond the ability of the old lady. Through the Home Help Scheme, a Home Help was provided and I feel I must pay tribute to the really excellent work this lady did.

Complaints were received during the year from the Council's Architect relative to water of an unusual colour which had appeared in the footings of houses to be built on the Doles Estate. Samples of the water were obtained both for Chemical and Bacteriological Examination, and I am pleased to be able to report, that other than heavy lime content, no other serious abnormality was found.

INSPECTION AND SUPERVISION OF FOOD

As in previous years, as much time as was able to be allowed, was devoted to this vitally important matter, and premises registered under the provisions of Section 14(2) of the Food and Drugs Act, 1938, were kept under regular supervision. One mobile wet fish shop depoted in the District was inspected from time to time, and mobile butchers shops coming into the District from outside were also inspected regularly. School canteens were also visited.

Food Premises

At the end of the year, the following Food Premises were in use in the District :—

Butchers shops—Retail—Private	10
Butchers Shops—Retail—Multiple Firms	3
Bakehouses	3
Cafes	2
School Canteens	3
Catering Establishments	1
Fried Fish Shops (also selling wet fish)	10
Wet Fish Premises (sold from Mobile Shop)	1
Greengrocers and Fruiterers	9
Grocers and General Dealers	43
Confectioners	2
Licensed Premises (including W.M. Clubs)	15

The various premises were inspected during the year and details of inspections made are given in the Table of Inspections.

Milk (Special Designation)(Raw Milk) Regulations, 1949

At the end of the year, two supplementary licences for the sale of milk under the Special Designation "Tuberculin Tested" remained in force in the District.

Milk (Special Designation)(Pasteurised and Sterilised Milk) Regulations 1949

At the end of the year, the following Supplementary Licences remained in force :—

Milk sold under the Special Designation "Pasteurised" 3

Milk sold under the Special Designation "Sterilised" 2

Ice-Cream

During the year, a further two applications were received for the registration of premises for the sale of Ice-Cream. The premises were inspected and Certificates of Registration issued for the sale of wrapped ice-cream only, the Council continuing to pursue their declared policy of not approving the sale of loose ice-cream from shops. In one instance, exception was taken by an applicant who quoted the sale of ice-cream from mobile vehicles, but this difficulty was able to be overcome.

At the end of the year, 25 sets of premises were registered as shown below :—

Storage and Distribution Depot 1

Sale of Wrapped Ice-Cream 24

No premises remain in the District for the manufacture of ice-cream.

Food Preparing Premises

There were no alterations in the premises registered under the provisions of Section 14(2) of the Food and Drugs Act, 1938, as premises used for the preparation of Sausages or Potted, Pressed, Pickled or Preserved Food intended for sale. Nine such premises continue to be registered and were inspected as frequently during the year as other work would allow. All such premises were found to be reasonably satisfactory.

Meat Inspection

Slaughtering in the two sets of premises, licensed temporarily in 1954 continued throughout the year, but during the year the Council passed a Resolution to the effect that they considered adequate facilities were available at the Barnsley Abattoir and as a result, from a date to fixed by the Minister of Agriculture, Fisheries and Food, licences for premises in the District to be used as slaughterhouses would not be renewed.

The Retail Butchers raised objections to the Council's Resolution and an Inquiry was held, following inspections of the two sets of premises by Officers of the Ministry. It was stated by butchers using both slaughterhouses, that one set of premises repaired and brought up to date would be adequate to supply the whole of the slaughtering needs of the District. Following the Inquiry, the Minister did not uphold the Council's Resolution, and all the Retail Butchers were invited to submit proposals for modernising the slaughterhouses and meetings were held between the Council and the Trade, but agreement by the Trade as to which slaughterhouse should be modernised was not reached. Furthermore on the receipt of information to the effect that new legislation could be expected dealing and clarifying the whole matter, temporary licences already granted were extended pending the receipt of the information promised.

All animals for slaughter were inspected both ante-mortem and post-mortem, and the standard of food animal slaughtered continued to be maintained at a very high level. Slaughtering practice was good and there was nothing to which exception could be taken.

The Table below gives details of food animals slaughtered in the District and unsound conditions found. The duties of Meat Inspection were mainly carried out after normal working hours, but this I felt was worthwhile having in mind the excellent quality of food animals slaughtered for the food of the District. It was possible, however, to arrange for slaughter, except very occasionally, not to be carried out on Sunday mornings, and some late slaughter could not be avoided at the beginning of the week when food animals were delivered late from the fat-stock markets and the butchers were anxious to finish slaughter as soon as possible not only for my sake but also for their own.

One boar was slaughtered in emergency during the year, but the meat from this animal was allowed to be used for immediate manufacturing purposes only.

I am pleased to be able to report that in no instance was evidence of Cysticercosis found although routine inspection for the presence of *Cysticercus Bovis* was carried out in all bovines slaughtered.

MEAT INSPECTION 1955

Carcases and Offal inspected and condemned in whole or in part

			Cattle excluding			Sheep and		
			Cows	Cows	Calves	Lambs	Pigs	Horses
Number killed	...	...	395	5	1	423	80	—
Number inspected	...	...	395	5	1	423	80	—
All Diseases except Tuberculosis and Cysticerci								
Whole carcasses condemned	...	...	—	—	1	—	—	—
Carcases of which some part or organ was condemned	...	...	29	1	—	3	—	—
Percentage of the number inspected affected with disease other than tuberculosis and cysti- cerci	...	...	7.34%	20%	100%	.708%	—	—
Tuberculosis only								
Whole carcasses condemned	...	...	—	—	—	—	—	—
Carcase of which some part or organ was condemned	...	...	48	1	—	—	5	—
Percentage of the number inspected affected with tuberculosis	...	...	12.16%	20%	—	—	6.25%	—
Cysticercosis								
Carcases of which some part or organ was condemned	...	...	—	—	—	—	—	—
Carcases submitted to treatment by refriger- ation	...	...	—	—	—	—	—	—
Generalised and totally condemned	...	...	—	—	—	—	—	—

Details of organs etc., rejected as unfit for food, for the conditions stated, are shown below :—

Tuberculosis

Bullocks

Sets of lungs	18
Heads and tongues	7
Livers	3
Mesentery and intestines	4

Heifers

Sets of lungs	18
Heads and tongues	11
Mesentery and intestines	1

Cows

Sets of lungs	1
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Pigs

Heads	2
Mesentery and intestines	5

Distomatosis

Lamb livers	3
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Cirrhosis

Heifer livers	5
Portions of Heifer liver	4 (approx. 24 lbs.)
Bullock livers	9
Portions of Bullock liver	3 (approx. 20 lbs.)

Abscesses

Bullock livers	5
Sets of Bullock lungs	1
Heifer livers	1
Sets of Heifer lungs	1
Cows livers	1

Melanosis

Sets of Bullocks lungs	1
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Parasitic

Sets of Bullock lungs	7
Sets of Heifer lungs	1

Insufficient Bleeding

Carcase and offal of calf	1
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All condemned material was voluntarily surrendered and was disposed of by burying under the Council's Refuse Tip.

OTHER FOODS

Details of other foodstuffs found to be unsound and which were voluntarily surrendered are given below. Such foodstuffs were also disposed of by burying on the Council's Refuse Tip—the only means of disposal.

Type of Foodstuff	Quantity
Cheese	72 lbs.
Beetroot	12 tins
Beans in tomato	2 tins
Beans and Pork Sausage	1 tin
Semolina	10 lbs.
Pork Sausage	16½ lbs.
Fish Cakes	12
Margarine	4 lbs.
Butter	5½ lbs.
Cookeen	1 lb.
Lard	1¾ lbs.
Tomatoes	22 tins
Greengages	6 tins
Milk	3 tins
Pineapples	4 tins
Plums	5 tins
Ham	27 lbs. 11 oz.
Bacon	15 lbs.
Dried Milk	56 lbs.
Corned Beef	36 lbs. 8 oz.
Peas	5 tins
Dried Fruit	12 ozs.
Cod Fillets	35 lbs.
Steak and Kidney Pudding	2 tins
Raspberry Syrup	1 tin
Grapefruit	1 tin
Beef Broth	3 tins
Pressed Beef	1 tin
Grapes	1 tin
Prunes	2 lbs.
Apricots	1 tin
Beef and Vegetable Soup	2 tins
Pork Luncheon Meat	1 tin
Peaches	2 tins
Pears	2 tins
Fruit Salad	2 tins
Raspberries	2 tins
Mandarin Oranges	2 tins

PREVENTION OF DAMAGE BY PESTS ACT, 1949

As in previous years, the systematic inspection of the District for the presence of rats and mice, coupled, if found necessary with complete treatments for their eradication, continued during the year under review.

No work on sewers was undertaken during the year as a result of the decision of the Ministry of Agriculture, Fisheries and Food (Infestation Division) in 1954, that as a result of apparent freedom from infestation, no further sewer treatment would be necessary until after April, 1956. This decision gave cause for satisfaction as it would appear to indicate that treatments carried out in other years had been efficacious and re-infestation had not occurred.

Regular routine inspections continued to be made at the Council's Refuse Tip, Salvage Shed, Pooles Lane Sewage Works and Church Hill Depot, treatments being given whenever this was found to be necessary. There was little or no evidence of residual infestation at these Council Undertakings at the end of the year.

Private properties continued to be treated by Block Control Methods.

TYPE OF PROPERTY

Non-Agricultural						
		Local Authority	Dwelling Houses (including Council Houses)	All Other (including Business Premises)	Total	Agri-cultural
I	Number of properties in Local Authority's District	5	2594	150	2749	6
II	Number of properties inspected as a result of					
	(a) Notification	—	24	1	25	—
	(b) Survey under the Act	5	—	—	5	—
	(c) Otherwise (e.g. when visited primarily for some other purpose	—	—	—	—	—
III	Total inspections carried out—including re-inspections	86	197	6	289	—
IV	Number of properties inspected (in Sec. II) which were found to be infested by:—					
	(a) Rats (Major	4	—	—	4	—
	(Minor	—	20	—	20	—
	(b) Mice (Major	—	—	—	—	—
	(Minor	—	4	—	4	—
V	Number of infested properties (in Sec. IV) treated by the L.A.	4	24	—	28	—
VI	Total treatments carried out—including re-treatments	8	24	—	32	—
VII	Number of notices served under Section 4 of the Act:					
	(a) Treatment	—	—	—	—	—
	(b) Structural Work (i.e. Proofing)	—	—	—	—	—
VIII	Number of cases in which default action was taken following the issue of a notice under Sec. 4 of the Act	—	—	—	—	—
IX	Legal Proceedings	—	—	—	—	—
X	Number of "Block" control schemes carried out	—	4	—	—	—

As in previous years, it is gratifying to be able to report that in no instance was it found necessary to take formal action for the carrying out either of treatment or structural repairs, everyone concerned being only too ready and willing to do everything possible to clear infestations and prevent, so far as possible, re-infestations.

BARNSELEY CANAL

This matter continued to be one for constant attention during the year.

The level of the water remaining in the canal continued to fall, flow became even less apparent and weed growths, especially during the long, dry, summer, more and more abundant, and the possibility of serious nuisance arising was ever present. Approach was again made to the Inland Waterways in connection with the weed growths and steps were taken for these to be removed. The canal was kept under constant observation, but even after the length of time which had elapsed, at the end of the year, conveyance of the canal to interested Parties in accordance with the Heads of Agreement, had not been effected.

The canal must continue to remain, therefore, as an open water-course, and until such time as the matter is finalised, must remain a potential menace to health.

PUBLIC CONVENIENCES

It is with profound regret that I have, once again, to submit a depressing Report on these public amenities. Mis-use was even more apparent during 1955, windows were constantly having to be replaced, fittings were damaged and on one occasion, sparges pipes were forcibly ripped from the wall in the Midland Road Conveniences. On many occasions these conveniences were left in a particularly foul condition, and it is disappointing to have to report that the side of the building reserved for the use of females was as badly mis-used as that used by males. Even though every effort was made to try to find the persons responsible for the damage, these efforts met with no success, but I feel very strongly on this matter.

As had been said repeatedly, the continuing wanton and senseless damage and destruction constantly found in all the public conveniences cannot be condemned too forcibly. The complete disregard of the cost of maintaining and repair public amenities by irresponsible persons must remain a matter of grave concern, and I feel that until such time as someone can be found causing destruction and damage and made an example of, apparently little can be done other than continually spending public money to little or no lasting benefit.

Towards the end of the year, it was found that the recently erected building at the entrance to the Park had fractured down the rear wall, and this I suspected to ground movement. The matter was referred to the National Coal Board, but responsibility for the damage to fabric was not accepted by that Board.

Plans were prepared for the erection of new conveniences, to replace the insanitary urinal at The Wells, but not a great deal of progress was able to be made owing to pressure of other work. At the same time, the bitter disappointments continually experienced from the mis-use of the Midland Road Conveniences can only give rise to misgivings and doubts as to what the fate of a further range of conveniences would be.

SUPPLY OF DUSTBINS

The Scheme whereby dustbins are renewed and charged to the General Rate Fund continued during the year.

The Scheme continued to work very smoothly, and in two instances, following reports of mis-use of dustbins received from the Public Cleansing Staff, visits to the houses concerned resulted in dustbins being used properly.

MOVEABLE DWELLINGS

As in previous years, the Council continued to regard the possible siting of such dwellings in the District with disfavour, and no such dwellings are permanently sited.

On one occasion, one trailer caravan was used, but only for a very short time.

CIVIL DEFENCE

Further efforts were made during the year to start training but without result.

MORTUARY

The Mortuary Building was cleaned down during the year, and necessary repairs to the roof were carried out.

Other than this, no works were found to be necessary.

CEMETERY

All Registers continued to be lodged in my office.

During the year ended March, 1956, the following interments took place in the Council's Cemetery :—

Interments involving re-opening of Graves	22
Interments in New Graves	47
Interments in Public Grave (Stillbirths, etc.)	5
	<hr/>
	74
	<hr/>

Two graves were bought "In Reserve".

Approval was given to the erection of 30 Memorials.

Income from fees during the year amounted to the sum of £319/17/6d. as detailed below :—

	£	s.	d.
Purchase of Graves	133	10	0
Re-opening of Graves	144	0	0
Interments in Public Grave	2	10	0
Vaulting Fees	—	—	—
Memorial Fees	33	15	0
Grants of Right	6	2	6
	<hr/> £319 17 6 <hr/>		

The system whereby mutual assistance was afforded the Parochial Church Council continued during the year, accounts for time spent preparing graves in the Church Burial Ground being rendered on the Parochial Church Council. Income from this source during the year amounted to £37/1/3d.

During the year, complaints were received relative to the overgrown condition of the Church Burial Ground, and this was referred to the Parochial Church Council. The possibility of the Council being able to supply necessary labour to clear up the Church Burial Ground was raised, but after an inspection, the amount of work requiring to be done made assistance in this respect impossible.

CONCLUSION

As will be apparent from the foregoing Report, the Sanitary Section of the Public Health Department had a most strenuous year as well as a very varied one. The very considerable increase in the number of callers at the office took up even more time than in earlier years and resulted in much visiting having to be done long after normal and accepted working hours. The provision and completion of houses on the Doles Estate accounted for no small amount of both additional interviews granted and late hour of working.

I would, once again, like to express my appreciation to the Chairman, Vice-Chairman and Members of the Health Committee for their support during a very trying year.

I would, too, draw attention to the co-operation which continued to exist between the office of the Divisional Medical Officer and my own. Without such co-operation, efficient Public Health Administration is not possible.

I am glad, also, of the opportunity of thanking my fellow Officials for the support and help which they afforded me in the discharge of my duties.

I am, Mr. Chairman, Madam and Gentlemen,

Your obedient Servant,

GEORGE E. MILLAR,

Sanitary Inspector
Cleansing Superintendent

